Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	12-20-2010	Address:	<u>5025 Beaman Ln</u>
Case #:	16-20189		Rochester, JN 46975
County:	<u>Fulton</u>		
Type of Laboratory Scizure (check one)		Scizure Location (check all that apply)	
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☑ Other: attached garage
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): (2) garage			
Red Phosphorous/Iodine Reaction(s): N/A			
☐ Flammable Solvents: garage			
Water Reactive Metal (Lithium): garage			
Anhydrous Ammonia: <u>N/A</u>			
Hydrochloric Acid Gas Generator(s): N/A			
Corrosive Acid: garage			
Corrosive Base: garage			
Other (item and location): N/A			
	er age 18 discovered (check one) (number present) port to Child Protective Services	Ephedrin	e Information e/Pseudoephedrine Tracking Log erchant Tip
This report is to be faxed to the following agencies that serve the location:			
Fire Depart	Department: Rochester VFD		224-8380
Health Department: Rochester Health Dep		Fax: <u>(574)2</u> Fax: <u>(574)</u> 2	
Child Prote	etion Service: Region 6	-	
For further information regarding this methamphetamine laboratory, contact Investigating Officer; Joshua Maller Phone (765) 473-6666			

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scone processing.

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.